



COMBINED DECLARATION AND POWER OF ATTORNEY

(ORIGINAL, DESIGN, NATIONAL STAGE OF PCT)

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name, I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention

entitled: METHOD AND APPARATUS FOR PROVIDING DATA FROM A DATA SOURCE TO A DATA

	CONSUMI	ER, AND FOR RENDERIN	G DATA FROM A DA	ATA PROVIDER TO AN INTERFACE
(b)	X is attace was filed Express Ma (if applicable)	d on iil No e).	, as Serial	No. not yet known, and was amended on No filed (if any).
	state that I ha		the contents of the above	e identified specification, including the claims,
	vledge the du Regulations		nich is material to patent	tability in accordance with Title 37, Code of
States of certificate America claimed.	f America li te or any PC filed by me no such appl	sted below and have also id T international application(s on the same subject matter ha ications have been filed.	dentified below any for s) designating at least of ving a filing date before	ng at least one country other than the United eign application(s) for patent or inventor's one country other than the United States of that of the application(s) of which priority is
(e) si	EARLIE	ons have been filed as follow ST FOREIGN APPLICAT 6 MONTHS FOR DESIGN	TON(S), IF ANY FILE	
COUNTE	-	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED
				Yes No
			1	YesNo
				Yes No
		DREIGN APPLICATION(S 6 MONTHS FOR DESIGN		



POWER OF ATTORNEY

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)

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The undersigned to this declaration and power of attorney hereby authorizes the U.S. attorney(s) named herein to accept and follow instructions from:

Name(s) of authorized representative(s)

Address

as to any actions to be taken in the Patent and Trademark Office regarding this application without direct communication between the U.S. attorney(s) and the undersigned. In the event of a change in the person(s) from whom instructions may be taken, the U.S. attorney(s) will be so notified by the undersigned.

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Direct Telephone Calls To:

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued therein.

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CHECK FOR ANY OF THE FOLLOWING ADDED PAGE(S) WHICH FORM A PART OF THIS DECLARATION

X This declaration ends with this page.